

Deutsche Gesellschaft für Medizinische Informatik, Biometrie und Epidemiologie e.V.

Competence Catalogue for Bachelor Degree Programs in (Bio-)Medical Informatics and Health Information Management

GMDS Working Group Curricula in Medical Informatics

Version 1.2 (Date: 10/09/2021 (1.0) and 07/04/2025 (1.2) after minor editorial revision) Contact and head of the GMDS working group: Prof. Dr.-Ing. Oliver J. Bott (oliver.bott@hs-hannover.de)



This document is to be referenced as follows:

Competence Catalogue for Bachelor Degree Programs in (Bio)Medical Informatics and Medical Information Management of the German Society for Medical Informatics, Biometry and Epidemiology (gmds). Version 1.0 from September 2021, version 1.2 from April 2025 after minor editorial revision). Available at: <u>https://www.gmds.de/index.php?id=1142</u>.



Foreword

Digitalisation in the healthcare sector significantly contributes to medical care, research and education. The corresponding speciality is medical informatics, which aims to improve the structure, process and outcome of healthcare provision and medical research using modern methods and tools of information technology. The roots of this discipline in Germany go back more than 50 years, when P.L. Reichertz introduced the term in Germany in 1969 and was quick to point out the benefits of using informatics in the healthcare sector and especially for medical purposes. In Germany Medical informatics as an application-orientated informatics subject has been represented and further developed by the scientific society GMDS for many decades.

Today, there is a huge number of applications. The development of the German national telematics infrastructure with many legally regulated applications, the requirements for the use of IT in hospitals based on the Krankenhauszukunftsgesetzes (engl. Hospital Future Act, a law from 2020 to promote the digitalisation of hospitals in Germany), the wide range of medical-technical solutions, but also the diverse range and possibilities of solutions outside the legal framework have become overwhelming.

A key success factor for further digitalisation in the healthcare sector and the development of appropriate, practicable solutions is the availability of interdisciplinary specialists who are familiar with the specifics of the healthcare sector, basic medical aspects and the variety of available IT methods and tools. The current situation is characterised by a great need for specialists, and the trend is increasing.

With a view to the wide range of available study programs, but also as an orientation aid for employers, the interdisciplinary GMDS working group "Curricula of Medical Informatics" has drawn up the present catalogue of competences for medical informaticians in a project lasting several years. The catalogue can be used to develop and compare Bachelor's degree programs on the one hand, but also supports employers in planning the professional development of career changers on the other. Using the catalogue, it is now easy to compare degree programs and qualifications. Prospective students or potential employers who have applications from graduates of a particular degree program, can use it to classify the specific skills mix in relation to the overall catalogue of possible skills.

It was important to the working group that, on the one hand, there was sufficient space for the specific aspects of the medical domain, but that computer science also had an equally important place, because only those who are IT-savvy and up to date can analyse processes, documentation and decision-making processes in the healthcare sector and then specify and develop appropriate, modern and future-oriented solutions or assess existing solutions in a qualified manner. The catalogue also includes a wide range of interdisciplinary skills that directly integrate knowledge of the symbiosis of IT and medicine or healthcare.

The GMDS Executive Committee would like to thank all those involved in the development of this catalogue of competences, who have invested a considerable amount of time in its development over the course of several years. May the catalogue of competences provide a framework for training, studies and professional orientation so that optimally qualified specialists will continue to be available in the future for a sustainable and effective healthcare system that is fit for the future.

Leipzig and Hanover in September 2021

Alfred Winter (President of the GMDS) Oliver J. Bott (Head of AG "Curricula of Medical Informatics")



Table of contents

Introduction
Chapter 1 Core competences and core skills in medical informatics, medical information management and biomedical informatics
Topic 1.1 Prerequisites and basics4
Subtheme 1.1.1 Use of personal information processing tools for documentation, for personal communication including Internet access, for publications and for basic statistics [IMIA: 1.4]
Subtheme 1.1.2 Development of specialisms as a discipline and as a professional field [IMIA: 1.1]
Sub-topic 1.1.3 Importance of systematic information processing in healthcare, added value and benefits and limitations of IT in healthcare [IMIA: 1.2].
Subtheme 1.1.4 Efficient and responsible use of information processing tools to support healthcare professionals and their decision-making [IMIA: 1.3].
Topic 1.2 Medical documentation and medical data management7
Subtopic 1.2.1 Information literacy: classification systems for libraries, systematic terminologies of the health care system and their coding, methods of literature search, research methods and research paradigms [IMIA: 1.5]7
Subtheme 1.2.2 Principles of documentation and data management in healthcare, including the ability to utilise medical and health-related coding systems; construction of medical and health-related coding systems [IMIA: 1.11].
Subtopic 1.2.3 Principles of data representation and data analysis from primary and secondary sources, data mining, data warehouses and knowledge management [IMIA: 1.14] 9
Topic 1.3 Information systems in medical care11
Subtopic 1.3.1 Features, functionalities and examples of application systems in healthcare (e.g. application systems for hospitals, medical practices, rehabilitation and care as well as for patients) [IMIA: 1.6]
Sub-topic 1.3.2 Architectures of healthcare information systems; approaches and standards for communication and interoperability (HL7, DICOM, IHE,) as well as for interface and integration concepts in the context of component-based architecture paradigms (e.g. service-orientated architectures) [IMIA: 1.7]
Subtheme 1.3.3 Management of healthcare information systems (management of health information, strategic and tactical information management, IT governance, IT service management, legal and regulatory aspects) [IMIA: 1.8]
Subtopic 1.3.4 Socio-organisational and socio-technical aspects including process and system analyses, process modelling, process design, process reorganisation [IMIA: 1.13]
Subtopic 1.3.5 Ethical issues and importance of information security including responsibilities of clinical staff, management and BMI specialists and aspects of confidentiality, protection and security of patient data



Subtopic 1.3.6 Evaluation and assessment of information systems, including study design, selection and triangulation of (quantitative and qualitative) methods, evaluation of outcome and impact, economic evaluation, adverse effects1	.5
Subtopic 1.3.7 Systematic reviews and meta-analyses, evidence-based medical informatics [IMIA: 1.19]1	.5
Topic 1.4 Cross-institutional information systems in medical care (health telematics and consumer health informatics)	.6
Subtheme 1.4.1 Methods and approaches for regional networking and integrated care (eHealth, telematics applications in the healthcare system, health telematics platforms, cross-institutional information exchange, health services research) [IMIA: 1.10]	.6
Subtopic 1.4.2 Structure, design and analysis principles for health records, including the concepts of data quality, minimum data set, architecture and general applications of electronic patient and health records [IMIA: 1.12]1	.7
Subtopic 1.4.3 Features, functionalities and examples of information systems to support patients and the population (e.g. architecture and application of patient-centred information systems, personal health records, sensor-based information systems, health apps) [IMIA: 1.9]	8
Topic 1.5 Medical-technical informatics and bioinformatics	
Sub-topic 1.5.1 Bioinformatics and systems medicine (incl. biomedical modelling and simulation) [IMIA: 1.15 with supplement]	
Subtopic 1.5.2 Biomedical image and signal processing [IMIA: 4.1]	0
Subtopic 1.5.3 IT-supported medical technology procedures (X-ray, CT, MR, angiography, sonography, scintigraphy, endoscopy, TEE/TTE, neurophysiology (EEG, NLG, EMG))	1
Subtopic 1.5.4 Integration of medical technology in healthcare information systems	2
Subtheme 1.5.5 Healthcare assistive technologies, ubiquitous computing, ambient assisted living [IMIA 4.3]	3
Subtopic 1.5.6 Medical robotics and computer-assisted surgery [partially from IMIA 4.7] 2	4
Topic 1.6 Information systems in medical research and teaching	4
Subtopic 1.6.1 Features, functionalities and examples of information systems to support clinical research (e.g. clinical trials, clinical registries, data integration centres)	4
Sub-topic 1.6.2 Computer science methods and tools to support teaching (including distance learning), use of relevant teaching technologies including the Internet and WWW	25
Sub-topic 1.6.3 Provision of and access to medical knowledge2	6
Chapter 2: Competences in medicine, health and life sciences, organisation of the healthcare	
system 2 Topic 2.1 Medicine, health and life sciences 2	
Subtopic 2.1.1 Fundamentals of the functioning of the human body (anatomy, physiology, microbiology, genetics, clinical specialities such as internal medicine, surgery, etc.) [IMIA: 2.1]	



Subtheme 2.1.2 Fundamentals of health from a physiological, sociological, psychological, nutritional, emotional, environmental, cultural, spiritual perspective and their evaluation [IMIA: 2.2]	28
Subtopic 2.1.3 Fundamentals of clinical and medical decision-making and diagnostic and therapeutic strategies [IMIA: 2.3]	29
Subtopic 2.1.4 Overview of important diagnostic and interventional procedures 2	9
Subtheme 2.1.5 Principles of evidence-based care (principles of clinical research, evidence- based medicine, evidence-based care) [IMIA: 2.6]	0
Topic 2.2 Organisation of the healthcare system 3	0
Subtheme 2.2.1 Organisation of healthcare facilities and the healthcare system, interorganisational aspects, integrated care [IMIA: 2.4]	0
Sub-theme 2.2.2 Political and regulatory framework conditions for information processing in the healthcare sector [IMIA: 2.5]	1
Subtheme 2.2.3 Health management, health economics, quality and resource management in healthcare, patient safety initiatives, public health services, impact assessment [IMIA: 2.7] . 3	2
Chapter 3: Competences in computer science, mathematics and biometrics	4
Topic 3.1 Informatics and computer science 3	4
Subtopic 3.1.1 Basic concepts of computer science such as data, information, knowledge, hardware, software, computer, network, information systems [IMIA: 3.1]	4
Sub-theme 3.1.2 Ability to use computers: Word processing and spreadsheets, simple database management systems [IMIA: 3.2]	4
Sub-theme 3.1.3 Ability to communicate electronically, including electronic data exchange with other healthcare providers, use of internet/intranet [IMIA: 3.3]	5
Subtopic 3.1.4 Methods of practical computer science, in particular programming languages, software engineering, web technologies, algorithms, data structures, database management systems, tools for information and system modelling, theory and practice of information systems, knowledge processing, term/concept representation and elicitation, software architectures [IMIA: 3.4].	5
Subtopic 3.1.5 Methods of theoretical computer science, e.g. formal languages, automata theory, decision and computability, complexity theory, modelling, simulation, encryption/security [IMIA: 3.5]	6
Subtheme 3.1.6 Computer engineering methods, e.g. operating systems, compiler construction, computer architectures, distributed systems, embedded systems, network architectures and topologies, telecommunications, wireless technologies, virtual reality, multimedia [IMIA 3.6].	57
Subtopic 3.1.7 Methods of coupling and integrating information system components in distributed systems [i.A.a. IMIA: 3.7]	8
Sub-topic 3.1.8 Dealing with the life cycle of information systems (analysis, requirements specification, implementation or selection of information systems, risk management, training) [IMIA: 3.8].	9



Sub-topic 3.1.9 Methods of project management and change management (in particular project planning, resource management, team management, conflict management, cooperation and motivation, theories and strategies for change processes) [IMIA: 3.9]	0
Subtopic 3.1.10. Basic concepts and applications of ubiquitous computing (e.g. pervasive computing, sensor-based systems and technologies integrated into the healthcare environment, health-supporting technologies, ubiquitous health)	1
Subtheme 3.1.11. Usability engineering, human-computer interaction, usability evaluation, cognitive aspects of information processing [IMIA: 3.14]	1
Topic 3.2 Mathematics, biometrics and decision support 4	2
Subtopic 3.2.1 Mathematics: algebra, analysis, logic, discrete structures, numerical mathematics, probability theory and statistics, cryptography [IMIA: 3.10]	2
Subtheme 3.2.2 Biometrics, epidemiology and research methods in medicine and health care, including study design [IMIA: 3.11]	3
Subtheme 3.2.3 Methods of decision support and their application to patient care; collection, representation and processing of medical knowledge; construction and use of clinical pathways and guidelines [IMIA: 3.12]	4
Chapter 4 Personal competences	6
Topic 4.1 Self-competence	6
Sub-theme 4.1.1 Self-competence 4	6
Topic 4.2 Methodological competence	6
Subtheme 4.2.1 Methodological competence 4	6
Topic 4.3 Social competence 4	7
Subtheme 4.3.1 Social competence	7



Introduction

At the end of 2014, the GMDS Executive Committee established the current working group "Curricula in Medical Informatics" (CMI). The task of the CMI is to develop recommendations for curricula for university education in medical informatics and related subjects, taking into account current and future requirements from science and practice. Requirements for MI training from an international perspective or corresponding training recommendations, e.g. from the IMIA, are to be taken into account. Furthermore, three perspectives are to be included or delineated:

- Medical Informatics (MI)
- Health Information Management/Medical Documentation (MD)
- Biomedical Informatics (BI)

In line with this mandate, the CMI was staffed with representatives of university teaching from the aforementioned areas as well as from professional practice, namely the KH-IT Bundesverband der Krankenhaus IT-Leiterinnen/Leiter e.V. (engl. Federal Association of Hospital Chief Information Officers) and the Bundesverband Gesundheits-IT (bvitg e. V., engl. Federal Association Health IT).

After several years of development, this catalogue of competences for Bachelor degree courses in Medical Informatics, Health Information Management / Medical Documentation and Biomedical Informatics is the first result of the CMI's work. The competence catalogue is structured hierarchically and is divided into four **chapters**, the chapters into a total of 13 **topics**, the topics into a total of 51 **sub-topics** and the sub-topics into individual **competences** to be acquired (234 in total). The chapters and topics are as follows:

- 1. Core competences and core skills in medical informatics, health information management and biomedical informatics
 - 1.1 Prerequisites and basics
 - 1.2 Medical documentation and medical data management
 - 1.3 Information systems in medical care
 - 1.4 Cross-institutional information systems for medical care (health telematics and consumer health informatics)
 - 1.5 Medical-technical informatics and bioinformatics
 - 1.6 Information systems in medical research and teaching
- 2. Expertise in medicine, health and life sciences, organisation of the healthcare system
 - 2.1 Medicine, health and life sciences
 - 2.2 Organisation of the healthcare system
- 3. Expertise in computer science, mathematics and biometrics
 - 3.1 Informatics and computer science
 - 3.2 Mathematics, biometrics and decision support
- 4. Personal competences
 - 4.1 Self-competence
 - 4.2 Methodological competence
 - 4.3 Social competence

The following Figure 1 provides an overview of the subject areas and the number of competences specified in each.



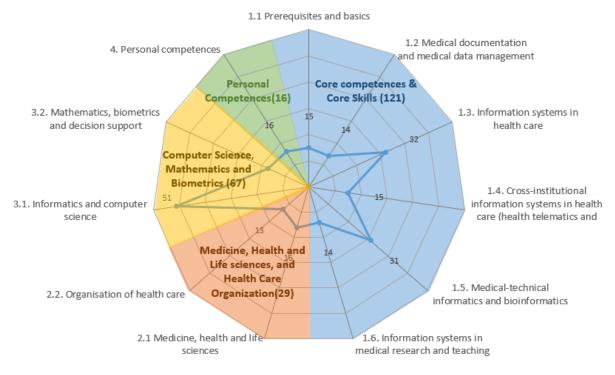


Figure 1: Chapters, subject areas and number of competences in the competence catalogue

Competences describe skills that students should or can acquire in corresponding study programs. A distinction is made between three successive competence levels based on Bloom's taxonomy¹:

- 1. Knowing and understanding
- 2. Applying and analysing
- 3. Evaluate and synthesise

Some of the competence descriptions contain supplementary **curricular information**, particularly on relevant content to be taught.

The catalogue of competences initially describes competences with a focus on Bachelor programs at universities. It is not intended that every study program teaches all competences at the specified levels; rather, the catalogue of competences represents a toolbox of potential competences that can be used to develop and/or describe the profile-specific range of competences of a study program. Overall, the following application scenarios are intended with the competence catalogue:

- As part of the development of relevant study programs, the catalogue is intended to provide support in defining the range of competencies to be taught.
- The catalogue is intended to enable a comparison of study programs, especially for prospective students and employers, by presenting the competences taught in a program-specific manner.
- The catalogue can support the accreditation of relevant degree programs by transparently presenting the desired competence profile by referring to the catalogue.

In a next step, the CMI will develop framework recommendations for selected study program profiles, each of which will specify a selection of minimum core competencies to be taught. The addition of further competences should enable program-specific compilations of competences that allow the special profile of the relevant study programs to be described.

¹ Anderson, Lorin W., and David R. Krathwohl, eds. 2001. A Taxonomy for Learning, Teaching, and Assessing: A Revision of Bloom's Taxonomy of Educational Objectives. New York: Addison Wesley Longman, Inc.



This first version of the competence catalogue is to be updated regularly every 5 years as part of a governance process in the context of commenting rounds in order to be able to take up current developments such as the currently increasing importance of data science methods. Web-based tool support will be offered for these commenting phases.

In further steps, the CMI will also develop competence profiles for Master's and doctoral programs.

The competence catalogue was developed on the basis of the Recommendations of the International Medical Informatics Association (IMIA) on education in biomedical and health informatics from 2010², whose hierarchical structure into topics and sub-topics was the basis for the division of this competence catalogue into chapters, topics and sub-topics. References to the corresponding sections of the IMIA Recommendations can be found in square brackets in the names of the sub-topics. Once the chapters, topics and sub-topics of the competence catalogue had been defined, potential competences to be taught in a Bachelor degree program were defined at the level of the sub-topics. After completion of an initial draft version, the catalogue of competences was subjected to commentary and subsequent revision by the CMI with the involvement of external experts.

The following people are currently or have been involved in the working group and the creation of this competence catalogue and its translation:

- Prof Dr Elske Ammenwerth, UMIT in Hall/Tyrol
- Prof Dr Tim Beißbarth, University Medical Center Göttingen, coordinating representative of the field BI
- Prof Dr Oliver J. Bott, Hanover University of Applied Sciences and Arts, representative of the BVMI and coordinating representative of the field HIM
- Prof Dr Martin Haag, Heilbronn University of Applied Sciences
- Prof Dr Peter Haas, Dortmund University of Applied Sciences and Arts
- Prof Dr Anke Häber, University of Applied Sciences, Zwickau
- Prof Dr Heinz Handels, University of Lübeck
- Jörg Holstein, Managing Director of VISUS in Bochum, representative of the bvitg
- Dr Alexander März, IT department at Nuremberg Hospital, physician, representative of the KH-IT
- Dr Dominik Müller, University of Augsburg
- Prof Dr Hans-Ulrich Prokosch, University of Erlangen
- Prof Dr Matthias Schlesner, University of Augsburg
- Prof Dr Paul Schmücker, Mannheim University of Applied Sciences, coordinating representative of the field MI
- Prof Dr Cord Spreckelsen, Jena University Hospital
- Prof Dr med. Sylvia Thun, BIH@Charité Universitätsmedizin Berlin

The following supported the creation of the competency catalogue

- Experts from the SMITH-Joint Expertise Center for Teaching (*SMITH-JET*) under the direction of Prof. Dr Alfred Winter, University of Leipzig
- Helmut Schlegel, KH-IT representative

² Mantas, J., Ammenwerth, E., Demiris, G., Hasman, A., Haux, R., Hersh, W., Hovenga, E., Lun, K. C., Marin, H., Martin-Sanchez, F., & Wright, G. (2010). Recommendations of the international medical informatics association (IMIA) on education in biomedical and health informatics. Methods of Information in Medicine, 49(2), 105-120. https://doi.org/10.3414/ME5119



Chapter 1 Core competences and core skills in medical informatics, health information management and biomedical informatics

Topic 1.1 Prerequisites and basics

Subtopic 1.1.1 Use of personal information processing tools for documentation, for personal communication including Internet access, for publications and for basic statistics [IMIA: 1.4].

No.	Expertise	Level	Content & curricular notes
1.1.1.1	Students can explain and use IT methods and tools to support study and training (including flexible and distance learning) and e-learning technologies (including the Internet and World Wide Web).	2. application and analysing	This includes tools for literature management and integration in texts, such as CITAVI, as well as methods and tools for personal knowledge management (e.g. mind maps).
1.1.1.2	Students are familiar with the structure and properties of file systems and can also use network and cloud-based file systems to organise their own file storage and that of work teams.	2. application and analysing	This includes applications for distributed version management of files (example: Git).
1.1.1.3	Students are familiar with the structure and features of typical office application systems and can use word processing systems, presentation systems, spreadsheet systems, note systems and e-mail clients efficiently.	2. application and analysing	In particular, advanced functions of spreadsheets calculation systems with their possibilities for statistical data analysis and presentation should be mastered. With regard to word processing, the focus is on the efficient creation of larger documents (especially scientific papers).

Subtopic 1.1.2 Development of fields as a discipline and as a profession [IMIA: 1.1]

No.	Expertise	Level	Content & curricular notes
1.1.2.1	Students will be familiar with the fields of medical informatics, health information management and biomedical informatics and will be able to define and differentiate between them and name and explain the main sub- areas.	1. knowing and understanding	In the presentation and delimitation of the fields, medical documentation should be included as a cross-sectional topic of all three fields mentioned.
1.1.2.2	Students can name typical problems and tasks in the fields of (bio)medical informatics and health information management	1. knowing and understanding	



	in the context of medical care and research.		
1.1.2.3	Students can explain the historical development of the fields of (bio)medical informatics and health information management in the context of the development of medical care and research.	1. knowing and understanding	

Subtopic 1.1.3 Importance of systematic information processing in healthcare, added value respectively benefits and limitations of IT in healthcare [IMIA: 1.2].

No.	Expertise	Level	Content & curricular notes
1.1.3.1	Students can explain the importance of systematic information processing for an effective healthcare system.	1. knowing and understanding	Discussion of the use of data in healthcare and medical research with reference to specific tasks of data processing, in particular in the context of medical documentation, medical, nursing and therapeutic decision-making, quality assurance and the various facets of medical research as well as billing and support for the management of effective and efficient service provision (processes) in clinics in terms of economy, quality of results and process performance. With regard to the illustration of the expected effects of systematic information processing, reference can be made to the German BMBF's Medical Informatics Initiative from 2017 to 2026.
1.1.3.2	Students can explain how the operation and management of healthcare facilities can be supported by IT systems.	1. knowing and understanding	This competence relates to the projection of the concept of business information systems from business informatics to information systems of healthcare facilities with reference to the differentiation between, in particular, administration and scheduling systems as well as management information and planning systems. A more differentiated concretisation of the support of medical action is addressed in competence 1.1.3.3.



1.1.3.3	Students know the facets of the	1. knowing and	The subdivision of the aspects of
	support of medical activities and	understanding	medical activities according to
	processes by IT systems and can		Haas 2004 can be used for
	name limits.		differentiation: Information
			transparency, the problem-
			orientated medical record, clinical
			pathways and treatment
			management, notification and
			reminder functions, integration of
			literature/knowledge bases,
			decision support functions. A more
			general distinction can be made
			between the support dimensions
			(ibid.): Processing, documentation,
			organisation, communication,
			decision support.
1.1.3.4	Students can explain how medical	1. knowing and	Knowledge of IT infrastructure
	research can be supported by IT	understanding	concepts and specific information
	systems.		system components to support
			medical research, especially in
			research networks, should be
			imparted. The German TMF e.V.
			and its affiliated initiatives should
			be mentioned as a relevant
			organisation and source of
			information in this field.
1.1.3.5	Students can explain the problem	1. knowing and	Importance of semantic reference
	of semantic interoperability with	understanding	systems for medical
	reference to the structure of		documentation, importance of
	medical documentation and the		standards for documentation and
	integration of information systems		data exchange
	in the healthcare system.		

Subtopic 1.1.4 Efficient and responsible use of information processing tools to support healthcare professionals and their decision-making [IMIA: 1.3].

No.	Expertise	Level	Content & curricular notes
1.1.4.1	Students can name and apply the	2. application	
	principles of appropriate	and analysing	
	documentation and health data		
	management (including the ability		
	to use and set up health and		
	medical coding systems).		
1.1.4.2	Students can name the basics of	1. knowing and	
	medical decision-making as well as	understanding	
	diagnostic and therapeutic		
	strategies and explain them using		



	the example of use cases/selected clinical scenarios.		
1.1.4.3	Students can name, explain and actively take into account political, regulatory and ethical framework conditions for dealing with information in the healthcare sector.	2. application and analysing	
1.1.4.4	Students will be able to plan and implement efficient and responsible use of information processing tools to support healthcare practice and decision- making by healthcare professionals.	2. application and analysing	

Topic 1.2 Medical documentation and medical data management

Sub-theme 1.2.1 Information literacy: classification systems for libraries, systematic terminologies of the health care system and their coding, methods of literature search, research methods and research paradigms [IMIA: 1.5].

No.	Expertise	Level	Content & curricular notes
1.2.1.1	Students know the basic options for acquiring literature and the principles of the rules for formal cataloguing in academic libraries. They understand how library management systems work in academic libraries. Students know the most important general and subject-relevant information resources and are able to use them when information is required. Students can analyse subject-specific problems and implement search strategies for relevant information resources.	2. application and analysing	Typology, function and areas of application of the most important forms of publication and information resources, especially in the fields of medicine and medical informatics. Formal cataloguing according to the RAK- WB. PICA as an example of a library management system. Presentation and use of selected examples. Development and targeted use of basic search strategies. Evaluation of search results. Use of a content indexing system (thesaurus or classification) when retrieving from databases. Possibilities of literature procurement.
1.2.1.2	Students know the importance of specialised databases as sources of specialised information. They have an understanding of the organisation, structure and the resulting use of specialist databases and can conduct	2. application and analysing	Organisation and structure of medical and medical informatics databases and their search options using the example of free offers on the WWW (PubMed, Open Access, Google Scholar etc.). Importance and application of content



	research in them. They understand the function of content indexing and can apply it correctly using the example of MESH for Medline/PubMed. Students know the thematic coverage and quality criteria of important medical databases on the WWW.		indexing for the search using the example of MeSH in PubMed. Basic overview of medically relevant professional and end-user orientated specialist databases.
1.2.1.3	Students are familiar with quantitative and qualitative research methods and steps in the research process.	2. application and analysing	Introduction to quantitative and qualitative research methods. Steps in the research process: gathering available knowledge, developing a research question or hypothesis, planning a study, conducting the study, analysing the data, drawing conclusions from the study, publishing the results.

Subtheme 1.2.2 Principles of documentation and data management in healthcare, including the ability to utilise medical and health-related coding systems; construction of medical and health-related coding systems [IMIA: 1.11].

No.	Expertise	Level	Content & curricular notes
1.2.2.1	Students know and understand the basic terms and concepts of documentation and organisation theory as well as information retrieval.	1. knowing and understanding	Procedure of the documentation process with the focus on formal and content-related indexing.
1.2.2.2	Students are familiar with the basic principles and legal framework of medical documentation. They are able to implement these in practice using typical documentation systems. They know and understand the structure of typical medical documentation.	2. application and analysing	Aim and tasks of medical documentation and documentary principles. Importance of structured/standardised documentation for science, healthcare, administration and billing. Converting medical facts into a suitable form of documentation. Typical medical documentation: Medical records, medical record archives, basic clinical documentation, documentation of findings, clinical tumour documentation, documentation for quality management, clinical and epidemic registers, documentation for



		clinical studies. Register,
		_
		documentation for clinical studies.
Students will be able to select or	3. evaluating	Criteria for selecting suitable
design the appropriate	and	documentation systems,
documentation system for a given	synthesising	systematic selection and
medical documentation task and		configuration of a documentation
create or configure the database		system, data models for
basis of the documentation		documentation systems, database
system professionally. They know		modelling of examples of clinical
and understand the methods of		documentation (e.g. diagnoses,
structured data acquisition.		laboratory data, procedures,
		patient master data, therapy
		documentation)
Students know and understand	2. application	Nomenclatures, vocabularies,
the basic concepts of general	and analysing	terminologies, ontologies and
terminology theory and the		taxonomies of biomedical
importance of terminological		informatics. Examples: ICD, OPS
systems for medical		and DRG as well as the thesaurus
documentation. They know and		MeSH (Medical Subject Headings),
understand the content, structure		the UMLS and further classification
and area of application of the		systems (e.g. TNM, MedDRA and
most important medical		AO classification) and
classification and terminology		nomenclatures (SNOMED). Data
systems and can apply selected		models of medical terminology
medical terminology systems in		systems.
practice.		
	documentation system for a given medical documentation task and create or configure the database basis of the documentation system professionally. They know and understand the methods of structured data acquisition. Students know and understand the basic concepts of general terminology theory and the importance of terminological systems for medical documentation. They know and understand the content, structure and area of application of the most important medical classification and terminology systems and can apply selected medical terminology systems in	design the appropriate documentation system for a given medical documentation task and create or configure the database basis of the documentation system professionally. They know and understand the methods of structured data acquisition.and synthesisingStudents know and understand the basic concepts of general terminology theory and the importance of terminological systems for medical documentation. They know and understand the content, structure and area of application of the most important medical classification and terminology systems and can apply selected medical terminology systems in2. application and analysing

Subtopic 1.2.3 Principles of data representation and data analysis from primary and secondary sources, data mining, data warehouses and knowledge management [IMIA: 1.14]

No.	Expertise	Level	Content & curricular notes
1.2.3.1	Students know the basic concepts of database technology and development and understand their significance for medical information and documentation systems. They know the most important description methods for data models and can use at least the ER technique for data modelling. They are able to systematically transfer an ER data model into a database schema.	2. application and analysing	Databases (introduction and overview). Database design, ER modelling, UML. The relational model and relational query languages. Data integrity and relational design theory. Project phases of creating a database.
	They can formulate simple database queries (relational algebra, SQL).		



1.2.3.2	Students know the principles of	2. application	Introduction to object-oriented
	object-oriented analysis and data	and analysing	analysis and modelling, in
	modelling as well as the Unified		particular with UML: classes,
	Modelling Language and can apply		objects, methods, inheritance,
	them. They can transfer a problem		polymorphism.
	area into an object-oriented data		
	model.		
1.2.3.3	Students master the theoretical	2. application	Structure and rules of XML. XML
1.2.3.5	principles required for the	and analysing	schema for structure description.
	professional use of XML. They are		XPath and XQuery for content
	able to create, search and edit		queries. XSLT for visualisation. XML
	XML files with the appropriate		serialisation of RDF. XSLT for
	tools.		visualisation.
1.2.3.4	Students know the most	2. application	Basics of the Semantic Web.
1.2.3.4	important concepts of the	and analysing	Thesauri, topic maps and
	Semantic Web and are able to	and analysing	ontologies. Languages of the
	model simple facts in the XML-		semantic web: RDF, RDF/XML,
	based languages of the Semantic		RDFS and OWL.
	Web.		
1.2.3.5	Students are familiar with	2. application	Architecture and application
1.2.3.5	application scenarios and	and analysing	scenarios of data warehouses
	architectural concepts of data		(DWH). Modelling of DWH
	warehouses, the data model,		(multidimensional modelling, OLAP
	storage and query realisation in a		operations) and implementation.
	data warehouse and can work on		Extraction, Transformation Load
	typical issues in data warehouses,		(ETL) processes. Queries and
	i.e. design and operate data		optimisation.
	warehouses.		optimisation.
1.2.3.6	Students are familiar with the	2. application	Introduction with application
	most important data mining	and analysing	scenarios for typical data mining
	methods for extracting		tasks: classification, segmentation,
	information from structured and		dependency and deviation
	unstructured data and can apply		analyses, time series
	these independently to typical		analyses/forecasts. Reference to
	questions in the field of		relevant machine learning
	application.		methods and preparatory data
			cleansing.
1.2.3.7	Students are familiar with basic	2. application	Introduction to knowledge
	models of knowledge	and analysing	management (motivation,
	management. They can describe		importance, building blocks).
	the importance of knowledge		Forms of knowledge (concept of
	management for the success of a		knowledge, knowledge and action,
	company and select and design		knowledge and ability, maturity
	targeted knowledge management		levels, knowledge ladder).
	methods in application scenarios.		Availability of knowledge (SECI
			model, story-telling, knowledge
			spiral; knowledge creation;
			knowledge loss). Value of



	knowledge (corporate value,
	intellectual capital, knowledge
	measurement, intellectual capital
	statement). Knowledge networking
	(social networks, internal
	networks, cross-organisational
	networks).

Topic 1.3 Information systems in medical care

Subtopic 1.3.1 Features, functionalities and examples of application systems in healthcare (e.g. application systems for hospitals, medical practices, rehabilitation and care as well as for patients) [IMIA: 1.6]

No.	Expertise	Level	Content & curricular notes
1.3.1.1	Students know important types of application systems in the outpatient and inpatient sector as well as in the area of public care and can describe which business tasks they support in each case.	1. knowing and understanding	Patient administration systems, clinical application systems (e.g. KAS, LIS, PIS, RIS, PACS, CPOE, archive, operating theatre, application systems for facility management and logistics (pharmacy, blood bank, warehouse, food supply, etc.) and general administration systems (e.g. application systems for financial accounting, controlling, revenue assurance, human resources).
1.3.1.2	Students can describe the typical functionality and user group for important types of application systems.	1. knowing and understanding	
1.3.1.3	Students can explain how different application systems work together to support information logistics in a healthcare organisation.	1. knowing and understanding	End-to-end process support
1.3.1.4	Students can identify and correctly name the application systems used in a specific example of a healthcare facility.	2. application and analysing	
1.3.1.5	Students know the tasks of IT risk management and can name the associated standards.	2. application and analysing	B3S, ISO 31000, ISO/IEC 20000-1, ISO 27005



Subtopic 1.3.2 Architectures of healthcare information systems; approaches and standards for communication and interoperability (HL7, DICOM, IHE,) as well as for interface and integration concepts in the context of component-based architecture paradigms (e.g. service-orientated architectures) [IMIA: 1.7].

No.	Expertise	Level	Content & curricular notes
1.3.2.1	Students are familiar with the most important communication and interoperability standards in the context of healthcare information systems and understand the basic structure of these standards and their suitability for various communication processes.	1. knowing and understanding	Important examples are HL7 with HL 7 version 2.x, version 3 (in particular CDA) as well as FHIR, IHE, openEHR, ISO 13606, DICOM and the German xDT standards for the outpatient sector. A link must be established to standards for semantic reference systems (e.g. SNOMED-CT, LOINC, ICD etc.).
1.3.2.2	Students know the importance of communication servers for message-based communication and their tasks and central functions.	1. knowing and understanding	Definition of the term communication server, typical tasks and functions, configuration, application functions, extended functions, especially in the context of data warehouses
1.3.2.3	Students can use a given communication standard to exchange information between sender and receiver.	2. application and analysing	For example, the use of HL 7 version 2.x for the transfer of a discharge notification to subsystems of a HIS in the context of a self-programmed simulation or laboratory environment. Or the use of FHIR to retrieve patient data.
1.3.2.4	Students are familiar with the various architectural forms of hospital information systems and their advantages and disadvantages and can explain these using a specific example.	2. application and analysing	Star architecture, spaghetti architecture; best of breed, all in one
1.3.2.5	Students are familiar with various integration requirements in hospital information systems and can use a specific example to describe the extent to which these are fulfilled and what the consequences are if they are not fulfilled.	3. evaluating and synthesising	Data integration, semantic integration, context integration, etc.
1.3.2.6	Students are familiar with the problem of unique patient identification and possible solutions in distributed systems.	2. application and analysing	The basic problem of unique patient identification, options for defining patient identifiers, advantages and disadvantages of semantic keys, need for a master



	patient index, the IHE/PIX profile,
	analysing and cleansing databases
	(merging patient data, separating
	patient data), use of the eGK for
	unique identification/lifelong
	insurance number

Subtopic 1.3.3 Management of healthcare information systems (management of health information, strategic and tactical information management, IT governance, IT service management, legal and regulatory aspects) [IMIA: 1.8]

No.	Expertise	Level	Content & curricular notes
1.3.3.1	Students can describe and differentiate between the tasks of strategic, tactical and operational management of information systems.	1. knowing and understanding	Information management, information logistics
1.3.3.2	Students can describe the purpose and structure of an IT strategy and explain it using a specific example and also show how the IT strategy is linked to the corporate strategy in terms of IT governance.	1. knowing and understanding	Discuss concrete IT strategy and its subdivision. Also address IT compliance with reference to the IT strategy, e.g. licence management
1.3.3.3	Students can provide an overview of the purpose and content of important norms and standards in the area of IT management in healthcare facilities.	1. knowing and understanding	COBIT, ITIL, Prince2, ISO27001, BSI, ISO/IEC 38500, ISO/IE 20000
1.3.3.4	Students can describe what organisational structures for IT management can look like and what their advantages and disadvantages are.	2. application and analysing	
1.3.3.5	Students can outline and justify an IT strategy for a selected organisational unit.	3. evaluating and synthesising	e.g. for a clinic: current status, evaluation, target status, project proposals

Subtheme 1.3.4 Socio-organisational and socio-technical aspects including process and system analyses, process modelling, process design, process reorganisation [IMIA: 1.13]

No.	Expertise	Level	Content & curricular notes
1.3.4.1	Students can explain why information systems are socio- technical systems and what this means for IT management.	1. knowing and understanding	Importance of process management, usability/HCI



1.3.4.2	Students know methods for	2. application	Observations, written surveys, oral
	analysing systems and are able to	and analysing	interviews, data analysis
	use these in a targeted manner in		
	a clinical environment.		
1.3.4.3	Students know a notation for	2. application	BPMN, UML, EPK
	business process modelling and	and analysing	
	are able to model a clinical		
	process in a comprehensible way.		
1.3.4.4	Students can evaluate a modelled	3. evaluating	
	clinical process using suitable	and	
	evaluation methods and then	synthesising	
	reorganise it in a targeted		
	manner.		

Subtopic 1.3.5 Ethical issues and importance of information security including responsibilities of clinical staff, management and BMI specialists and aspects of confidentiality, privacy and security of patient data

No.	Expertise	Level	Content & curricular notes
1.3.5.1	Students know the concept of information security and can define the various aspects of information security and explain them using examples.	1. knowing and understanding	Confidentiality, availability, integrity,
1.3.5.2	Students understand the need to protect sensitive data and can explain both the objectives and measures of data protection.	1. knowing and understanding	Role of MI!
1.3.5.3	Students can outline norms, standards and legal foundations of information security and data protection.	1. knowing and understanding	ISO27001, BSI,
1.3.5.4	Students can describe which aspects of information security have been breached in a specific situation and what impact this can have on patient care.	2. application and analysing	
1.3.5.5	Students can explain which groups of people are responsible for different aspects of information security.	2. application and analysing	



Subtopic 1.3.6 Evaluation and assessment of information systems, including study design, selection and triangulation of (quantitative and qualitative) methods, evaluation of outcome and impact, economic evaluation, adverse effects

No.	Expertise	Level	Content & curricular notes
1.3.6.1	Students understand the need to	1. knowing and	
	systematically evaluate	understanding	
	information systems in terms of		
	effectiveness and efficiency as		
	well as undesirable effects.		
1.3.6.2	Students are able to formulate	2. application	
	and justify the objectives and	and analysing	
	questions of an evaluation in a		
	given situation.		
1.3.6.3	Students are familiar with key	1. knowing and	
	quantitative and qualitative	understanding	
	methods of data collection and		
	data analysis as well as typical		
	study designs for evaluation		
	studies.		
1.3.6.4	Students know the essential steps	2. application	
	of an evaluation study and are	and analysing	
	able to draw up an evaluation		
	plan.		
1.3.6.5	Students are able to search for	3. evaluating	
	evaluation studies via literature	and	
	research and critically assess their	synthesising	
	results and quality.		

Subtopic 1.3.7 Systematic reviews and meta-analyses, evidence-based medical informatics [IMIA: 1.19]

No.	Expertise	Level	Content & curricular notes
1.3.7.1	Students can describe the purpose and structure of systematic reviews and meta-analyses and understand their necessity as the basis of evidence-based medical informatics.	1. knowing and understanding	
1.3.7.2	Students can search for systematic reviews and meta-analyses on a given question and critically assess their conclusions.	2. application and analysing	



Topic 1.4 Cross-institutional information systems in medical care (health telematics and consumer health informatics)

Subtheme 1.4.1 Methods and approaches for regional networking and integrated care (eHealth, telematics applications in the healthcare system, health telematics platforms, cross-institutional information exchange, health services research) [IMIA: 1.10]

No.	Expertise	Level	Content & curricular notes
1.4.1.1	Students know the main challenges in health care and the motivation and value contribution of telematics solutions, they know the essential interaction scenarios and are able to categorise existing IT-based solution approaches using an application taxonomy.	1. knowing and understanding	Current problems such as demographic development, sectorisation of care; complexity of cross-institutional processes, interaction scenarios in the healthcare system; value contribution through networking and support in the five different support dimensions processing, documentation, communication, organisation and decision support; application taxonomy with three classes: care, teaching and training, research; web services as integration technology
1.4.1.2	Students know the most important aspects and solution approaches for distributed information systems and understand, how information systems work together and at which levels integration must take place and can analyse and design interoperability approaches.	2. application and analysing	Integration levels: the five OPD viewpoints, the levels of integration: technical integration / data integration / semantic integration / function integration / presentation integration / business process integration
1.4.1.3	Students know the legal regulations for the development of the national telematics infrastructure and its applications.	1. knowing and understanding	Regulations in German SGB V, role of national agency gematik, national applications i.e. VSDM, medication plan, emergency data set, electronic patient record system, KIM, role of cards, security infrastructure in accordance with national legislation
1.4.1.4	Students are familiar with the main components/systems of a health telematics platform and existing standards for this, as well as the elements of the planned national telematics infrastructure (TI) in Germany.	1. knowing and understanding	Elements of the governance infrastructure, the technology infrastructure, the security infrastructure and the application infrastructure, terminology server, Health Provider Directory and IHE profiles, the role of OIDs, the TI components



			connector/eGK/HBA/networks and interaction using the examples of VSDM and emergency data
1.4.1.5	Students are familiar with CDA- based medical reports and its possibilities for the cross- institutional communication and can evaluate, plan and implement report communication solutions.	3. evaluating and synthesising	CDA-based reports in general, special benefit for transmitting findings, processing steps in the sending and receiving system, software-based parsing of reports for data use in the receiving system, procedure for designing new communications based on the CDA-based reports, user aspects in the primary systems of the providers
1.4.1.6	Students recognise the potential for health services research and a learning healthcare system.	1. knowing and understanding	Health services research and health services data, basic structure of telematics solutions for health services research, the role of medical registers, the concept of a learning healthcare system, interoperability requirements for data collections for health services research and a learning healthcare system

Subtopic 1.4.2 Structure, design and analysis principles for health records including the concepts of data quality, minimum data set, architecture and general applications of electronic patient and health records [IMIA: 1.12].

No.	Expertise	Level	Content & curricular notes
1.4.2.1	Students know the objectives of	1. knowing and	Difference between institutional
	cross-facility patient records and	understanding	and cross-institutional electronic
	the value contribution in contrast		patient records, cross-institutional
	to pure point-2-point doctor's		record types: Case records, doctor-
	reports communication, they		managed patient records, patient-
	know different patient record		managed health records,
	types and their characteristics and		emergency data and patient
	categorisation criteria in detail		summary record, register records
	and can outline solution		and integrative approaches. Basic
	approaches for given problems.		interaction of primary IT-systems
			and patient record systems using a
			case study.
1.4.2.2	Students know the difference	2. application	Principle paradigm, resulting basic
	between document-based patient	and analysing	data models, IHE/XDS, ISO 13606,
	record systems and granular		openEHR, the role of FHIR for
	phenomenon-based record		record interoperability



	systems as well as standards for		
	the paradigms.		
1.4.2.3	Students know the various aspects	3. evaluating	Information structuring and
	that need to be considered when	and	semantics, content strategy,
	using cross-facility record systems	synthesising	information synchronisation,
	and what this means for		interoperability, functionalities for
	interoperability between record		various purposes, data protection
	systems and primary IT-systems of		aspects in general and aspects of
	the providers and can analyse and		rights management in particular
	design solutions with regard to		
	these aspects.		
1.4.2.4	Students are familiar with the use	2. application	Specific care scenarios and use of
	and value contribution of record	and analysing	record systems: dementia care,
	systems for various care scenarios,		geriatric care, palliative care,
	integration of telemonitoring into		monitoring and care of coronary
	patient record systems.		disease patients, psychiatric care
1.4.2.5	Students are familiar with	1. knowing and	Record systems as the basis for
	advanced application aspects and	understanding	treatment management, cross-
	scenarios using electronic patient		facility clinical pathways and
	record systems.		treatment management, team-
			orientated action by different
			professional groups, problem-
			orientated medical record
			according to Weed, patient record
			as the basis for decision-support
			mechanisms

Subtopic 1.4.3 Characteristics, functionalities and examples of information systems to support patients and the population (e.g. architecture and application of patient-centred information systems, personal health records, sensor-based information systems, health apps) [IMIA: 1.9].

No.	Expertise	Level	Content & curricular notes
1.4.3.1	Students are familiar with current trends and the changes in roles in	1. knowing and understanding	Stages of illness and patient needs, patient sovereignty and self-
	the healthcare system due to the use of IT as well as the basic support options for patients.		management, the role of IT in the patient-doctor relationship, health literacy applications, positive and critical aspects of a new distribution of roles, virtual patient
1.4.3.2	Students know the basic functionalities of record systems for patients and can analyse solutions for the support of patients.	2. application and analysing	communities/forums Patient Self-documentation, self- organisation, electronic communication with treatment team members, context-sensitive literacy research and management, example OpenNotes from Harvard University



1.4.3.3	Students know the objectives, functionality and various implementation options of health apps and interoperability of apps and record systems.	2. application and analysing	Health apps and health behaviour, basic characteristics (purely local, local with background system, central as web app), data protection aspects, taxonomy of health apps, application examples e.g. diabetes, obesity, medication
1.4.3.4	Students are familiar with the basic model for telemonitoring and the use and integration of sensors for various purposes.	1. knowing and understanding	management Principle models for telemonitoring according to VDI, interoperability of sensors and apps or background systems, sensor technologies, integrative application example AAL

Topic 1.5 Medical-technical informatics and bioinformatics

Subtopic 1.5.1 Bioinformatics and systems medicine (incl. biomedical modelling and simulation) [IMIA: 1.15 with supplement].

No.	Expertise	Level	Content & curricular notes
1.5.1.1	Data management in	1. knowing and	1. public molecular biology
	bioinformatics	understanding	resources and databases
			2. structuring of biomedical
			knowledge
			3. integration of biological and
			medical background knowledge
1.5.1.2	Sequence analysis	2. application	1. alignment
		and analysing	2. sequence database search
			3. phylogeny
1.5.1.3	Molecular structures and	1. knowing and	1. protein 3D structure modelling
	pathways	understanding	2. RNA structures
			3. molecular networks and
			pathways
			4. function prediction
1.5.1.4	Analysing high-throughput data	3. evaluating	1. basic statistical analyses
	(omics)	and	(descriptive, linear regression,
		synthesising	ANOVA)
			2. visualisation of high-dimensional
			data (heatmap, Vulcano plot,
			distributions)
			3. classification and prediction
			(therapy response, survival, clinical
			endpoints)



1.5.1.5	Systems modelling	2. application	1. systems biology and modelling
		and analysing	of biological and medical processes
			2. systems medicine and
			implementation of systems models
			in clinical research and routine
			practice

Subtopic 1.5.2 Biomedical image and signal processing [IMIA: 4.1]

No.	Expertise	Level	Content & curricular notes
1.5.2.1	Students are able to classify and characterise basic procedures for medical image processing.	1. knowing and understanding	Point operators (histogram operations etc.), local operators (edge and smoothing filters), segmentation methods: Threshold- based segmentation and region growing, morphological operators, rigid and affine registration, quantitative analysis of image data (distance and angle measurement, ROI analysis, etc.)
1.5.2.2	They are able to differentiate between various methods of segmentation, cluster analysis and statistical pattern recognition and characterise them based on the implicitly used, different model assumptions and properties. They are able to use these methods to segment medical multispectral image data and to recognise objects.	2. application and analysing	Region growing, threshold-based segmentation, cluster analysis and classifiers for image segmentation: K-Means method, Bayesian classification, ML classification, Euclidean and Mahalanobis classifier, K-NN classification
1.5.2.3	Students can evaluate the segmentation results of different methods using established quality measures and carry out an objective comparison of the quality of different segmentation methods in practical application.	2. application and analysing	Quality measures: Dice coefficient, Hausdorff distance, mean contour and surface distance, etc.
1.5.2.4	They are able to assess the properties of rigid and affine image registration methods and to select and parameterise similarity measures and regularisation terms for a specific registration problem.	2. application and analysing	Feature space, similarity measure (SSD, mutual information), search space
1.5.2.5	Students can implement basic image processing algorithms and use them in combination with	2. application and analysing	Point operators (histogram operations etc.), local operators (edge and smoothing filters),



	medical image processing modules available in a software library.		segmentation methods: Threshold- based segmentation and region growing, morphological operators, rigid and affine registration, quantitative analysis of image data
1.5.2.6	They have the ability to develop problem-adequate medical image analysis systems using various software tools. They will be able to analyse complex tasks, divide them into subtasks and implement them collaboratively.	2. application and analysing	E.g. with MatLab, ITK or VTK

Subtopic 1.5.3 IT-supported medical technology procedures (X-ray, CT, MR, angiography, sonography, scintigraphy, endoscopy, TEE/TTE, neurophysiology (EEG, NLG, EMG))

No.	Expertise	Level	Content & curricular notes
1.5.3.1	Students are familiar with the most important imaging procedures in radiological and nuclear medicine diagnostics as well as sonography and endoscopy, their basic technical principles, their typical range of indications and the resulting data formats and processing methods.	1. knowing and understanding	Digital radiography, CT, MRI, angiography, etc., functional diagnostics: scintigraphy, PET-CT, etc., DICOM standard Sonography and special procedures such as high-frequency sonography, Doppler sonography, TTE (transthoracic echocardiography) and TEE- transoesophageal (swallowing echo) Endoscopy and special procedures such as capsule endoscopy, double balloon endoscopy, etc.
1.5.3.2	Students are familiar with the most important diagnostic procedures in neurophysiology, their basic technical principles, their typical range of indications and the resulting data formats and processing methods.	1. knowing and understanding	EEG, NLG, EMG etc.
1.5.3.3	Students know the essential standards and standardisation initiatives in the context of imaging and signal-processing diagnostics and are able to apply them.	2. application and analysing	DICOM, IHE, etc.
1.5.3.4	Students are familiar with the key requirements arising from the Medical Devices Act and the	1. knowing and understanding	MPG (Medizinproduktegesetz: German medical device regulation), risk management,



	European Medical Device Regulation for the development of medical devices.		authorisation procedures and regulatory authorities
1.5.3.5	Students can analyse and present signal data and assess it in terms of quality and content information. They are able to identify relevant information in the data.	2. application and analysing	The pragmatic reference is the recognition of anomalies in the set of signals as the basis for diagnostics.
1.5.3.6	Students can practically apply the basic principles of medical device design in test environments.	2. application and analysing	
1.5.3.7	Students can develop simple sensor-based measurement systems for recording biosignal data. They are conceptually able to set up a medical device development project in accordance with the provisions and requirements of the Medical Devices Act.	3. evaluating and synthesising	

Subtopic 1.5.4 Integration of medical technology in healthcare information systems

No.	Expertise	Level	Content & curricular notes
1.5.4.1	Students know the typical technical integration and architecture concepts for medical devices in healthcare information systems.	1. knowing and understanding	Integration in HIS, KAS, PDMS etc. via communication server and transmission standards if necessary.
1.5.4.2	Students know the typical data transmission standards and semantic reference systems for the integration of medical devices and can apply them.	2. application and analysing	HL7, DICOM, GDT, SNOMED, LOINC, OID, UCUM, IHE etc.
1.5.4.3	Students know how a communication server works and can configure it for integration tasks.	2. application and analysing	
1.5.4.4	Students know the organisational and regulatory requirements for the integration of medical devices in the area of responsibility, technology, organisation, work processes/operation and safety and can set up an integration project.	3. evaluating and synthesising	MPG (Medizinproduktegesetz: German medical device regulation), operator responsibility, risk management (ISO 80001-1), etc.



Subopic 1.5.5 Healthcare assistive technologies, ubiquitous computing, ambient assisted living	
[IMIA 4.3]	

No.	Expertise	Level	Content & curricular notes
1.5.5.1	Students explain the legal aspects of health-supporting technology in terms of the Medical Device Regulation and data protection legislation and categorise planned projects in terms of regulatory requirements.	1. knowing and understanding	EU Medical Device Regulation; software as a medical device and classification of health assistive technologies into product classes; EU General Data Protection Regulation and opening clauses for national legislation; data protection impact assessment and technical and organisational measures (TOMs) for data protection and data security in the context of health assistive technologies, ubiquitous computing and AAL
1.5.5.2	Students can integrate stationary, mobile and wearable sensors into information systems via interfaces and evaluate the quality of the data stream.	2. application and analysing	Sensor types and basic functional principles; sensor-related data formats, interfaces and communication standards (including MQTT/MQTT-SN, SSI); sources and frequency of signal interference; algorithmic detection and classification of signal anomalies; Internet of Things (IoT) standards
1.5.5.3	Students explain the definition, application scenarios and technical approaches for Ambient Assisted Living (AAL) and AAL systems (AALS).	1. knowing and understanding	Smart home paradigm; real-time monitoring of environments; activity modelling and activity recognition; identification of critical situations (e.g. fall detection); telemedical health monitoring;
1.5.5.4	The students explain approaches for managing and analysing large real-time data streams.	1. knowing and understanding	Ring storage solutions; smart grids, open gateway platforms (OSGi); complex event processing; architectures (including Lambda Architecture)
1.5.5.5	Students justify the relevance of interprofessionalism and the need for and challenges of intersectoral communication.	3. evaluating and synthesising	Geriatric care structures; cross- sector care processes; technical aspects of intersectoral communication, in particular different data communication standards (xDT vs. HL7 standards)



Subtopic 1.5.6 Med	cal robotics and c	computer-assisted	surgery [nartially	from IMIA 4 71
Supropic T.S.O MEU	cal lobotics and c	unputer-assisted	surgery (partially	1011 IIVIIA 4.7]

No.	Expertise	Level	Content & curricular notes
1.5.6.1	Students can provide an overview of robotic systems currently used in medicine and explain typical disease profiles and care scenarios and their respective treatment or support by robotic systems.	1. knowing and understanding	Robots in surgery, care, etc.
1.5.6.2	Students know the special requirements of the environment and the system for a robot- assisted operation and can name the conditions for a robot-assisted operation and the necessary preparatory measures.	1. knowing and understanding	Equipment, operating theatre setting, team aspects, regulatory requirements, etc.
1.5.6.3	Students can explain the use of a robotic system in the operating theatre using typical scenarios and are able to design corresponding workflows for a robot-assisted procedure.	2. application and analysing	
1.5.6.4	Students know the technical aspects of using a robot system and can apply these to the development of robot-based systems.	2. application and analysing	Kinematics, tracking systems, collision detection and avoidance, basic procedures for the registration of image data from different modalities and physical registration with its various flexibilisation levels

Topic 1.6 Information systems in medical research and teaching

Subtopic 1.6.1 Features, functionalities and examples of information systems to support clinical research (e.g. clinical trials, clinical registries, data integration centres)

No.	Expertise	Level	Content & curricular notes
1.6.1.1	Students know the essential data-	1. knowing and	Basic knowledge of GCP/GEP, data
	related business processes of	understanding	collection principles and data
	clinical research, from the		structures; knowledge of the
	collection of data at the study		"Good Clinical Data Management
	centres to verification and		Practices" (GCDMP) of the Society
	validation and the preparation of		for Clinical Data Management.
	data for biostatistical analysis.		Knowledge of study planning and
	They are familiar with laws,		the creation of data management
	regulations and standards that		plans.
	define the national and		
	international requirements for		



	data management in clinical		
	research projects.		
1.6.1.2	Students can name the relevant	1. knowing and	Electronic data capturing (EDC),
	classes of specialised software	understanding	creation of electronic case report
	systems for clinical research and		forms (eCRF), clinical trial
	understand their purpose. They		management systems (CTMS),
	know the main data exchange		clinical data management systems
	standards for clinical research and		(CDMS), document management
	understand their scope of		systems (DMS), drug safety
	description. They know and		systems (DSS), radomisation
	understand the architectural		systems, ePRO systems (Patient
	concepts of data integration		Reported Outcome), metadata
	centres and the relevant basic		repositories, clinical data
	technologies.		warehouses; architectures of data
			integration centres; CDISC
			standards (SDTM, ODM etc.)
1.6.1.3	Students can describe the steps of	2. application	Conducting an example study with
	the implementation phase in	and analysing	a CDMS, methods of data
	clinical data management in		collection and quality control
	detail. They can plan, implement		based on the design of eCRFs or
	and carry out data entry and		clinical database models,
	verification as well as data import		validation of clinical database
	and validation using the relevant		models, query process, medical
	specialised software.		coding, tasks/professional profiles
			of a clinical data manager.
1.6.1.4	Students know the task and	1. knowing and	Public health registers, health
	structure of the various medical	understanding	services research registers,
	registers, they know the		epidemiological registers, clinical
	requirements for software		registers, cancer registers,
	systems for medical registers and		pharmacovigilance registers,
	understand their purpose.		quality registers, etc. Software
			systems for registries.

Subtopic 1.6.2 Methods and tools of computer science to support teaching (including distance learning), use of relevant teaching technologies including the Internet and WWW

No.	Expertise	Level	Content & curricular notes
1.6.2.1	Students know the fundamental terms of technology-supported teaching and learning such as MOOC, learning management system, gamification or serious games for health and know when these concepts or tools can be used beneficially for training,	1. knowing and understanding	
	education or therapy.		



r			
1.6.2.2	Students know what must be	1. knowing and	
	observed with regard to copyright	understanding	
	when creating teaching/learning		
	software or educational material		
	and which exceptions apply to		
	research and teaching.		
1.6.2.3	Students know the basic forms of	2. application	
	technology-supported teaching	and analysing	
	and learning and are able to		
	create hypertexts using HTML.		
1.6.2.4	Students can create lecture	2. application	
	recordings and make them	and analysing	
	available on the internet or		
	intranet.		
1.6.2.5	Students are able to	3. evaluating	Possibly in another chapter
	independently research and	and	(overarching topic). However, I
	acquire new knowledge from the	synthesising	have put it here, so it does not get
	Internet and in relevant literature		lost.
	databases (ability for lifelong		
	learning).		

Subtopic 1.6.3 Provision of and access to medical knowledge

No.	Expertise	Level	Content & curricular notes
1.6.3.1	Students can outline and explain	1. knowing and	Nonaka-Takeuchi cycle, McElroy
	relevant phase models of	understanding	cycle, Wiig cycle
	knowledge management.		
1.6.3.2	Students know and use relevant	2. application	Institutional sources (e.g. PubMed,
	sources in order to gain systematic	and analysing	NGCH/AWMF, RKI); keyword vs.
	access to knowledge.		keyword search; query syntax of
			relevant sources; relevant
			application programming
			interfaces (e.g. NCBI APIs)
1.6.3.3	Students will be able to explain	1. knowing and	Role of terminology systems and
	and apply methods of semantic	understanding	classifications in the indexing of
	indexing of knowledge and		content. Implementation and use
	transfer the necessary associated		of metadata repositories and
	skills from the context of medical		ontologies; Semantic Web
	documentation and terminology		techniques (RDF, SPARQL)
	work.		
1.6.3.4	Students can describe relevant	2. application	Criteria and application framework
	approaches to quality assurance	and analysing	of HON, afgis; DISCERN
	of (internet) sources for health		instrument; Fact Sheets and Fact
	information and use them for		Boxes; Institutional and
	their own evaluation.		organisational infrastructure



1.6.3.5	Students can explain measures of	2. application	Recall, Precision, Accuracy, True
	retrieval quality and use them for	and analysing	negative rate, F-Measures
	evaluation.		



Chapter 2: Competences in medicine, health and life sciences, organisation of the healthcare system

Topic 2.1 Medicine, health and life sciences

Subtopic 2.1.1 Fundamentals of the functioning of the human body (anatomy, physiology, microbiology, genetics, clinical specialities such as internal medicine, surgery, etc.) [IMIA: 2.1].

No.	Expertise	Level	Content & curricular notes
2.1.1.1	Students know the basics of	1. knowing and	Fundamentals of human anatomy,
	human anatomy, pathology,	understanding	pathology, histology, physiology
	pharmacology and physiology.		and pharmacology
2.1.1.2	Students know the basics of	1. knowing and	Incl. LOINC, Snomed CT, ICD-10
	microbiology, laboratory medicine	understanding	
	and human genetics.		
2.1.1.3	Students can apply the findings	2. application	Create catalogues of requirements
	from the basic subjects in the	and analysing	for clinical IT.
	clinical subjects (surgery, internal		
	medicine, gynaecology)		
	(diagnostics and therapy) and		
	analyse the IT requirements.		
2.1.1.4	Students can apply and evaluate	3. evaluating	Create catalogues of requirements
	the findings from the basic	and	for clinical IT.
	subjects in special clinical fields	synthesising	
	(psychiatry, neurology,		
	anaesthesia, radiology,		
	dermatology) and analyse the		
	requirements for IT.		

Subtopic 2.1.2 Fundamentals of health from a physiological, sociological, psychological, nutritional, emotional, environmental, cultural, spiritual perspective and their evaluation [IMIA: 2.2].

No.	Expertise	Level	Content & curricular notes
2.1.2.1	Students know the basics of	1. knowing and	
	health from physiological,	understanding	
	sociological, nutritional,		
	environmental, cultural and		
	spiritual perspectives.		
2.1.2.2	Students can analyse the	2. application	
	requirements of IT on the basis of	and analysing	
	physiological, sociological,		
	nutritional, environmental,		
	cultural and spiritual perspectives.		



Subtopic 2.1.3 Fundamentals of clinical and medical decision-making as well as diagnostic and therapeutic strategies [IMIA: 2.3].

No.	Expertise	Level	Content & curricular notes
2.1.3.1	Students are aware of the	1. knowing and	Regulatory requirements:
	regulatory frameworks of the	understanding	Regulatory requirements for
	pharmaceutical industry and the		ePharma. ePrescription,
	IT systems that play a role in it.		medication plan, drug therapy
	They know the key players and are		safety (AMTS)
	aware of the important role		
	played by drug information		
	systems and testing in the e-		
	health environment.		
2.1.3.2	Able to apply formal decision-	2. application	ARDEN Syntax, Data analytics with
	making languages and	and analysing	Snomed CT, Big Data
	mechanisms.		
2.1.3.3	Students can evaluate and	3. evaluating	
	synthesise large amounts of data.	and	
		synthesising	

Subtopic 2.1.4 Overview of important diagnostic and interventional procedures

No.	Expertise	Level	Content & curricular notes
2.1.4.1	Students gain knowledge and insights into the important routine medical-technical procedures. They are familiarised with the areas of application of the usual examination procedures in acute medicine.	1. knowing and understanding	MRI, CT, radiotherapy, nuclear medicine, X-ray, ultrasound, endoscopy, laboratory, ECG
2.1.4.2	Students know the function and benefits of medical diagnostic and therapy devices (sensor technology, interfaces) as well as the underlying physical and mathematical theory.	1. knowing and understanding	IEEE 11073, sensoring, Consumer Healthcare (APPS)
2.1.4.3	Students analyse the interaction between IT and medical diagnostic and therapeutic devices.	2. application and analysing	ISO 80.001



Subtopic 2.1.5 Principles of evidence-based care (principles of clinical research, evidence-based medicine, evidence-based care) [IMIA: 2.6]

No.	Expertise	Level	Content & curricular notes
2.1.5.1	Students acquire knowledge of the most important methods of EBM and Health Technology Assessments including their areas of application.	1. knowing and understanding	IQWiG (German Institute for Quality and Efficiency in Health Care), literature research, literature databases
2.1.5.2	Students are able to critically assess specialist literature from epidemiology as well as HTA and apply the findings to their own work.	2. application and analysing	Analyse HTA reports
2.1.5.3	Students are able to understand, design clinical studies and place them in an overall context.	2. application and analysing	Knowledge of (international) databases, study planning, study design, implementation, study documentation, Good Clinical Practice (CPMP/ICH/135/95)
2.1.5.4	Students can relate "big data" to evidence-based research and clinical studies.	2. application and analysing	

Topic 2.2 Organisation of the healthcare system

Subtheme 2.2.1 Organisation of healthcare facilities and the healthcare system, interorganisational aspects, integrated care [IMIA: 2.4]

No.	Expertise	Level	Content & curricular notes
2.2.1.1	Students have a basic	1. knowing and	Political and self-governing
	understanding of the German	understanding	organisations, e.g. in Germany:
	healthcare system, the political		Federal Ministry of Health (BMG),
	and legal frame conditions and the		Federal Joint Committee (G-BA),
	central processes and players in		Institute for Quality and Efficiency
	healthcare organisations.		in Health Care (IQWiG), Institute
			for Quality Assurance and
			Transparency in Health Care
			(IQTIG), the natioanl Associations
			of Statutory Health Insurance
			Physicians and Dentists, German
			Hospital Associations, associations
			of physicians, dentists,
			psychotherapists and pharmacists,
			non-physician healthcare
			professions, patient organisations
			and self-support, etc.



2.2.1.2	Students are familiar with the	1. knowing and	Hospital key figures (inpatient
	organisation and organisational	understanding	beds, inpatient/outpatient case
	structure of outpatient and		numbers, CMI). Hospital classes
	inpatient healthcare facilities as		(basic care, standard care,),
	well as integrated care concepts		hospital owners (private, non-
	and the associated cross-		profit, public, state, city, district,
	institutional service processes.		professional associations, etc.).
			Outpatient care (GP, specialist,
			MVZ,). Medical service providers
			(physiotherapists,). Acute and
			rehabilitation clinics.
2.2.1.3	Students can compare the	1. knowing and	
	healthcare systems of selected	understanding	
	countries.		

Subtopic 2.2.2 Political and regulatory framework conditions for information processing in the healthcare sector [IMIA: 2.5]

No.	Expertise	Level	Content & curricular notes
2.2.2.1	Students will be able to name and apply the key principles and legal regulations of data protection and IT security. They know the main institutions and organisations involved in data protection and IT security.	2. application and analysing	In particular GDPR (General Data Protection Regulation of the European Union), IT Security Act, etc.; data protection officers/authorities of the federal and state governments, BSI, etc.
2.2.2.2	Students know the regulatory requirements for the development of medical software and can apply them.	2. application and analysing	Medical Device Regulation, Medical Devices Act (MPG), regulations, IEC 62304, safety classification and interaction with risk management in accordance with ISO 14971, usability requirements, etc.
2.2.2.3	Students know the legal basis of medical documentation.	1. knowing and understanding	Medical documentation obligation in accordance with the Professional Code of Conduct for Doctors (Section 11 (1) MBO), relevant sections of the German Criminal Code (StGB) and Civil Code (BGB), Patient Rights Act, statutory regulations on archiving medical records (e.g. X-ray Ordinance), regulations on digital signatures (eIDAS Regulation (EU), Trust Services Act) and preservation of evidence (BSI TR- 03125 - BSI), etc.



2.2.2.4	Students know the national and	2. application	Phases of clinical drug
	international regulatory	and analysing	development with their primary
	requirements and (data)		objectives including current
	standards for medical research		national and international laws
	and are able to apply them.		and regulations and ethical
			standards to be considered in drug
			development nationally and
			globally. Good Clinical Practice
			(GCP) in the planning, conduct and
			evaluation of a clinical trial. Data
			standards such as CDISC etc.
2.2.2.5	Students know the regulatory	1. knowing and	MBO (remote treatment), Digital
	framework for telemedical care.	understanding	Care Act (DVG), Appointment
			Service and Care Act (TSVG), etc.

Subtopic 2.2.3 Healthcare management, health economics, quality and resource management in healthcare, patient safety initiatives, public health services, impact assessment [IMIA: 2.7]

No.	Expertise	Level	Content & curricular notes
2.2.3.1	Students have an overview of the remuneration structures in the German healthcare system and are familiar with the different remuneration systems in the outpatient and inpatient sectors. They understand the associated incentive structures and their effects.	1. knowing and understanding	Billing of outpatient services (GOÄ, EBM), inpatient services (DRG system) etc.
2.2.3.2	Students have a basic understanding of the concepts and regulatory framework of quality assurance in medical care. They can develop documentation and evaluation systems focussed on quality assurance.	2. application and analysing	Basic terms and contexts: quality, quality assurance, quality management; patient orientation and patient satisfaction as objectives of quality management; assessment of quality in healthcare and significance of quality indicators; methods of quality assurance, e.g. statutory quality assurance, quality assurance through routine data, external quality comparisons, risk adjustment for quality comparisons, benchmarking, peer review, minimum quantities; clinical risk management; introduction and further development of quality management systems;



			Public and private reporting; pay for performance; international
			comparisons; evidence-based medicine.
2222	Churche and a log of the state of the side of the state o	1. I	Fundamentals and
2.2.3.3	Students know the basic principles	1. knowing and	
	of the management of material	understanding	interrelationships of purchasing
	and human resources with regard		and warehouse management,
	to the special requirements of		merchandise management
	medical documentation and billing		systems, logistics, personnel
	in this area.		planning. Medical documentation
			requirements such as batch
			documentation obligation, implant
			register, implant passport,
			material-based coding and
			liquidation.
2.2.3.4	Students are familiar with key	1. knowing and	Quality and safety requirements,
	concepts, initiatives and legal	understanding	e.g. in the German Drug and
	requirements for patient safety.		Medical Devices Act, Infection
			Protection Act; quality assurance
			obligations (external quality
			assurance and internal quality
			management), e.g. in SGB V,
			Patient Rights Act, Hospital
			Structure Act, drug therapy safety,
			surgical checklists, etc.
2.2.3.5	Students can explain the field of	1. knowing and	Subfields: Combating infectious
	public health and its sub-areas.	understanding	diseases, social medicine, health
			protection, health statistics and
			epidemiology, prevention and
			health promotion, health care,
			public mental health, health
			systems research



Chapter 3: Competences in computer science, mathematics and biometrics

Topic 3.1 Informatics and computer science

Subtopic 3.1.1 Basic concepts of computer science such as data, information, knowledge, hardware, software, computer, network, information systems [IMIA: 3.1]

No.	Expertise	Level	Content & curricular notes
3.1.1.1	Students know basic computer	1. knowing and	
	science terms such as data,	understanding	
	information, knowledge,		
	hardware, software, computer,		
	network, information systems and		
	can differentiate between them.		
3.1.1.2	Students are familiar with the	1. knowing and	
	subdisciplines of computer science	understanding	
	and their basic insights and		
	methods.		
3.1.1.3	Students use the basic terms of	2. application	
	computer science correctly in	and analysing	
	discussions and in written		
	assignments.		
3.1.1.4	Students can assign new technical	2. application	
	developments and trends in	and analysing	
	computer science to the		
	subdisciplines of computer		
	science.		

Subtopic 3.1.2 Ability to use computers: Word processing and spreadsheets, simple database management systems [IMIA: 3.2]

No.	Expertise	Level	Content & curricular notes
3.1.2.1	Students know the basic	1. knowing and	
	functionalities of a typical Office	understanding	
	suite and are able to judge which		
	Office tools can be used for which		
	type of problem.		
3.1.2.2	Students can evaluate and	2. application	
	visualise data using a spreadsheet.	and analysing	
3.1.2.3	Students know the possibilities	2. application	
	and limitations of simple database	and analysing	
	management systems and can use		
	such systems to solve suitable		
	problems.		



3.1.2.4	Students are able to use the	2. application	e.g. look up commands for macro
	documentation of Office suites to	and analysing	programming
	solve problems.		

Subtopic 3.1.3 Ability to communicate electronically, including electronic data exchange with other healthcare providers, use of internet/intranet [IMIA: 3.3].

No.	Expertise	Level	Content & curricular notes
3.1.3.1	Students know the differences	1. knowing and	
	between the internet and intranet	understanding	
	and know when intranet		
	applications are preferable to		
	internet or cloud solutions.		
3.1.3.2	Students know the essential legal	2. application	
	requirements regarding data	and analysing	
	protection and data security and		
	are able to take these adequately		
	into account when exchanging		
	data electronically.		
3.1.3.3	Students know the relevant	2. application	
	standards for data exchange in the	and analysing	
	healthcare sector, such as HL7		
	FHIR, and can select and use these		
-	for data exchange.		
3.1.3.4	Students know and understand	1. knowing and	
	the basics of XML, DTD, XML	understanding	
	schema, XSLT and tools for editing		
	XML files, such as XML parsers.		
3.1.3.5	Students are able to define their	2. application	
	own XML languages and use them	and analysing	
	appropriately for the exchange of		
	data.		

Subtopic 3.1.4 Methods of practical computer science, in particular programming languages, software engineering, web technologies, algorithms, data structures, database management systems, tools for information and system modelling, theory and practice of information systems, knowledge processing, term/concept representation and elicitation, software architectures [IMIA: 3.4].

No.	Expertise	Level	Content & curricular notes
3.1.4.1	Students know basic data structures and associated algorithms.	1. knowing and understanding	



3.1.4.2	Students are able to use the	2. application	Class diagrams, sequence
5.1.4.2			
	Unified Modelling Language (UML)	and analysing	diagrams, activity diagrams and
	in particular to describe software		use case diagrams are particularly
	systems.		relevant
3.1.4.3	Students are able to create, test	2. application	The teaching of development
	and document object-oriented	and analysing	environments should include
	software using tools such as		distributed development, in
	development environments,		particular with systems for
	systems for distributed version		distributed version control (e.g.
	control, tools for test automation,		Git).
	etc.		
3.1.4.4	Students are able to create simple	2. application	
	interactive web applications using	and analysing	
	HTML, CSS and a scripting		
	language such as JavaScript.		
3.1.4.5	Students can use basic knowledge	2. application	Students must be able to
	of the principles and methods of	and analysing	programme SQL-92 queries
	database, information and		
	knowledge-based systems (based		
	on structured and semi-structured		
	data) to solve problems.		

Subtopic 3.1.5 Methods of theoretical computer science, e.g. formal languages, automata theory, decidability and computability, complexity theory, modelling, simulation, encryption/ data security [IMIA: 3.5].

No.	Expertise	Level	Content & curricular notes
3.1.5.1	Students know the basics of	1. knowing and	
	computability theory, complexity	understanding	
	theory, automata theory and the		
	theory of formal languages.		
3.1.5.2	Students can distinguish between	2. application	
	computable and non-computable	and analysing	
	problems and are able to estimate		
	the effort required to solve		
	problems.		
3.1.5.3	Students are able to protect	2. application	
	stored data, electronic	and analysing	
	communication and electronic		
	data exchange with other		
	healthcare providers from		
	unauthorised access in accordance		
	with the law, e.g. by selecting and		
	using suitable encryption		
	procedures and organisational		
	measures.		



3.1.5.4	Students can identify and create	3. evaluating	
	context from a wide variety of	and	
	data sources and are able to	synthesising	
	translate data relationships into		
	calculable model structures and to		
	visualise and explain them.		
	Existing boundary conditions can		
	be named and their relationship		
	to the model structures described.		
3.1.5.5	Students master common	3. evaluating	
	simulation techniques and are	and	
	able to harmonise available data,	synthesising	
	questions and simulation methods		
	and create executable models that		
	enable reproducible answers of		
	the models to previously defined		
	questions.		1

Subtopic 3.1.6 Methods of technical computer sciences, e.g. operating systems, compiler construction, computer architectures, distributed systems, embedded systems, network architectures and topologies, telecommunications, wireless technologies, virtual reality, multimedia [IMIA 3.6].

No.	Expertise	Level	Content & curricular notes
3.1.6.1	Students know the basic structure,	1. knowing and	
	functionality and functional	understanding	
	processes of software programs		
	on von Neumann processor		
	architectures and are familiar with		
	optimisation options for memory		
	accesses and the interrupt		
	concept.		
3.1.6.2	Students know the basics of	1. knowing and	
	operating systems, both for	understanding	
	desktop and mobile processors.		
3.1.6.3	Students are familiar with relevant	2. application	
	network architectures and	and analysing	
	topologies, can use these in		
	projects and understand the basic		
	principles of network protocols.		
3.1.6.4	Students are familiar with the	2. application	
	relevant wireless technologies and	and analysing	
	are able to select the most		
	suitable technology for their use		
	case.		



3.1.6.5	Students are able to select and	2. application	Consider the special requirements
	use suitable file formats for the	and analysing	of medical diagnostics
	transmission and storage of		
	multimedia data (image, sound,		
	video).		
3.1.6.6	Students are familiar with current	3. evaluating	
	developments and concepts in the	and	
	field of computer technology, such	synthesising	
	as requirements for mobile		
	devices in terms of energy		
	efficiency and sensor data		
	processing, augmented, mixed		
	and virtual reality, and can assess		
	the extent to which these can be		
	used to solve problems in the		
	healthcare sector.		

Subtopic 3.1.7 Methods of coupling and integrating information system components in distributed systems [i.A.a. IMIA: 3.7].

No.	Expertise	Level	Content & curricular notes
3.1.7.1	Students know the basic problems for interoperability of information systems.	1. knowing and understanding	Communication between humans and systems, syntactic and semantic aspects, schema and semantic mismatches between systems, role of terminology servers
3.1.7.2	Students know the different technologies for system coupling/interoperability and can apply them depending on their previous knowledge of computer science.	2. application and analysing	Overview of data synchronisation mechanisms, data exchange via email, via RFC/RPC, via web services, brief introduction to SOAP and REST.
3.1.7.3	Students can derive web service specifications from given information models.	3. evaluating and synthesising	Step-by-step procedure for the design of web service interfaces, conversion of class models into hierarchical XML structures or JSON, service customisation based on use cases or interaction scenarios, creation of service matrix, definition of WSDL files.



Subtopic 3.1.8 Dealing with the life cycle of information systems (analysis, requirements specification, implementation or selection of information systems, risk management, training) [IMIA: 3.8].

No.	Expertise	Level	Content & curricular notes
3.1.8.1	Students know the phases of system development from analysis to operation to the end of live as	1. knowing and understanding	Principle software-development phases: Analysis, design, implementation, test, acceptance,
	well as various process models.		introduction, operation / different
			approaches: linear - spiral model -
		- H - H	agile methods
3.1.8.2	Students know different methods	2. application	Analysis through evaluation of
	of requirements analysis and can	and analysing	documents and legacy systems,
	apply them.		observation, interviews,
			workshops / quality criteria for
			analyses, concepts of
			requirements engineering
3.1.8.3	Students are familiar with various	2. application	Statement collections, use cases,
	methods of requirements	and analysing	interaction diagrams, processing
	specification and can apply these		flowcharts, mockups, information
	to document requirements in a		models / UML notation for this
	structured manner.		purpose
3.1.8.4	Students know the process and	2. application	Market exploration procedure,
	aspects of selecting IT solutions	and analysing	tendering process, framework
	and are able to carry one out.		conditions for public clients (VOL,
			EVB-IT), hierarchical catalogue of
			features and functionalities, non-
			functional criteria, aspects of
			economic efficiency and
			sustainability of investments,
			return on investment, utility value
			analysis for bid evaluation,
			presentations, provider
			presentation and discussion,
			contract aspects and negotiations
3.1.8.5	Students know the procedure for	2. application	Phases of system implementation,
	introducing systems and critical	and analysing	methods and tools for user
	success factors for successful		education, role of first and second
	implementation.		level support, error management,
			data protection/backup strategies,
			data migration from an old to a
			new solution



Subtopic 3.1.9 Methods of project management and change management (in particular project planning, resource management, team management, conflict management, cooperation and motivation, theories and strategies for change processes) [IMIA: 3.9].

No.	Expertise	Level	Content & curricular notes
3.1.9.1	Students know the concept of a project and how to define a project, students know different types of projects and accordingly procedures and organisational methods and can name relevant standards.	1. knowing and understanding	Definition of a project, project phases and milestones, specification of work packages, structural and procedural organisation in projects, organisational forms such as line or matrix organisation, roles and role-specific tasks in projects; PRINCE, PM Book, Scrum
3.1.9.2	Students know methods and tools for project planning and can apply them.	2. application and analysing	Definition of Ressources, methods of cost estimation, creation and structure of resource and time planning, GANTT diagram, identification of the critical path, tools for project planning
3.1.9.3	Students can define, set up and maintain project documentation.	2. application and analysing	Document templates for project documents, naming conventions, filing structures, indexing, project documentation using WIKI and DMS/CMS, collaborative creation of project documents, documentation of the completion status and project progress
3.1.9.4	Students know methods and tools for collaboration in projects and team management.	2. application and analysing	Structure and contents of a project manual, moderation of groups/moderation techniques, preparation and realisation of project meetings, definition of reporting and communication structures/paths, team cooperation, conflict management strategies, automation
3.1.9.5	Students know methods and tools for quality and risk management in projects.	2. application and analysing	Identification of risks/risk analysis, definition and monitoring of quality indicators, definition and implementation of escalation chains, project monitoring and early warning systems



Subtopic 3.1.10. Basic concepts and applications of ubiquitous computing (e.g. pervasive computing, sensor-based systems and technologies integrated into the healthcare environment, health-supporting technologies, ubiquitous health)

No.	Expertise	Level	Content & curricular notes
3.1.10.1	Students are familiar with the characteristics, methods, algorithms and technologies of current ubiquitous systems.	1. knowing and understanding	Definition and delimitation of the terms of the subject area, architecture concepts, sensor technology, mobile devices, mobile communication, interfaces.
3.1.10.2	Students are familiar with typical fields of application and scenarios for ubiquitous systems in medicine as well as existing regulatory requirements.	1. knowing and understanding	Discussion of typical fields of application for ubiquitous systems (ambient assisted living, ambient health, smart home, etc.) using the example of specific projects and/or products. Clarification of regulatory issues relating to IT security and data protection.
3.1.10.3	Students are able to develop ubiquitous and context-sensitive systems and applications in the context of medicine.	2. application and analysing	Development of smaller applications using ubiquitous technologies (sensors, middleware, wireless communication, etc.)
3.1.10.4	Students are able to assess the opportunities and risks of using ubiquitous systems and to evaluate their application benefits.	3. evaluating and synthesising	Methodological knowledge for the criteria-based evaluation of ubiquitous systems.

Subtopic 3.1.11. Usability engineering, human-computer interaction, usability evaluation, cognitive aspects of information processing [IMIA: 3.14]

No.	Expertise	Level	Content & curricular notes
3.1.11.1	Students know the basics of and	2. application	Usability as a concept, usability of
	the framework for usability	and analysing	application software/criteria, EN
	engineering and can plan		ISO 9241 and its parts
	usability projects.		
3.1.11.2	Students know the basic	1. knowing and	Perception, attention, memory
	cognitive principles and their	understanding	models, visualisation principles
	consequences for user		
	interfaces.		
3.1.11.3	Students can test the usability of	2. application	Usability test and evaluation
	systems and application settings.	and analysing	methods, analysis of usage
			observations/usage statistics, etc.
3.1.11.4	Students can analyse and specify	2. application	User groups and profiles,
	user-related requirements (user	and analysing	specification of usage context,
	research).		methods of usage analysis, context
			analysis



3.1.11.5	Students can implement user	3. evaluating	Design principles according to ISO
	requirements in prototypes.	and	9241-110, creation of mockups for
		synthesising	different target environments
			(classic application, web
			application, app)

Topic 3.2 Mathematics, biometrics and decision support

Subtopic 3.2.1 Mathematics: algebra, analysis, logic, discrete structures, numerical mathematics, probability theory and statistics, cryptography [IMIA: 3.10]

No.	Expertise	Level	Content & curricular notes
3.2.1.1	Students master the basics of set theory and logic and can apply these to practical problems.	2. application and analysing	Set theory and propositional logic, functions, relations, equivalence relations, proof methods
3.2.1.2	Students master the basics of analysis and can apply them to practical problems.	2. application and analysing	Sets, mappings, relations, complex numbers, convergence of sequences and series, differential and integral calculus with one variable, ordinary differential equations
3.2.1.3	Students master advanced methods of analysis and can apply them to practical problems.	2. application and analysing	2nd order differential equations with constant coefficients, Fourier series, Fourier transform and differential and integral calculus in several variables
3.2.1.4	Students master the basics of linear algebra and can apply them to practical problems.	2. application and analysing	Vector spaces, fields, systems of linear equations, linear and affine mappings, base transformation, homogeneous coordinates, scalar product, eigenvalue problems, quadratic forms
3.2.1.5	Students master the basics of stochastics and can apply them to practical problems.	2. application and analysing	Discrete probability space, Kolmogorov's axioms, combinatorics, conditional probability, stochastic independence, random variables, expected values, higher moments, correlations, Chebyshev's inequality, weak and strong law of large numbers, De Moivre's and Laplace's theorem, introduction to hypothesis testing and estimation theory
3.2.1.6	Students know the basics of statistics and can apply them using statistical software.	2. application and analysing	Task and significance of descriptive/analytical statistics; basic concepts: population, types of survey, sample, characteristics,



			scaling, frequency distributions, class formation; statistical parameters (location and scattering measures) and graphical representation of data; statistical distributions (binomial distribution, normal distribution, etc.); basic principle of a statistical test; application of statistical software (data preparation, data import, evaluation and output)
3.2.1.7	Students master advanced statistical methods and can apply them using statistical software.	2. application and analysing	Methods of inferential statistics for one or two samples, methods for estimating the functional relationship between two characteristics and methods for estimating the required sample size; multi-factorial methods
3.2.1.8	Students know the basics of numerical analysis and can apply them.	2. application and analysing	Error analysis, linear systems of equations and mean-square problems, polynomials, polynomial interpolation, quadrature, non- linear equations
3.2.1.9	Students know the basics of discrete mathematics and can apply them.	2. application and analysing	Fundamentals of elementary number theory (Euclidean algorithm, modulo calculus, Euler's theorem), algebraic structures (groups, rings, solids), combinatorics and graph theory.
3.2.1.10	Students master the basics of cryptography including symmetric and asymmetric cryptographic methods commonly used in practice and can apply these methods.	2. application and analysing	PKI, cryptographic procedures and their relation to the basic problems of IT security (confidentiality, integrity, authentication, non- repudiation), Triple DES, RSA algorithm, Diffie-Hellman key exchange protocol, etc.

Subtopic 3.2.2 Biometrics, epidemiology and research methods in medicine and health care, including study design [IMIA: 3.11].

No.	Expertise	Level	Content & curricular notes
3.2.2.1	Students know the basics of scientific practice in medicine.	2. application and analysing	Basic principles of clinical studies, study designs, study types & false
	They know the types of medical studies, principles and basics of controlled randomised studies and epidemiological surveys and can		conclusions; epidemiological methods / measures in epidemiology: prevalence and incidence, mortality and lethality,



	evaluate them. They are able to appropriately recognise and apply the aspects of planning medical studies.		point versus period prevalence, incidence rate and cumulative incidence; direct and indirect age standardisation; Good Epidemiological Practice (GEP) guidelines, epidemiology as a science and prevention as its practical goal; evaluation of information, evidence-based medicine;
3.2.2.2	Students can apply the most important statistical evaluation	2. application and analysing	Univariate and bivariate descriptive measures, correlation
	procedures for biometrics and	, ,	and regression in clinical research
	epidemiology and correctly		questions, descriptive measures in
	interpret the results of inferential		contingency tables, diagnostic
	statistical procedures.		studies and assessment of
			diagnostic tests, application and
			interpretation of statistical tests
			and confidence intervals in clinical
			studies, case number planning,
			survival time analysis,
			interpretation of trends and
			mortality measures

Subtopic 3.2.3 Methods of decision support and their application to patient care; collection, representation and processing of medical knowledge; construction and use of clinical pathways and guidelines [IMIA: 3.12].

No.	Expertise	Level	Content & curricular notes
3.2.3.1	Students will be able to explain process models and data	2. application and analysing	Modelling-view metaphor; protocol analysis, conducting and
	collection tools for medical	, ,	analysing semi-structured
	knowledge acquisition and apply		interviews; concept laddering and
	them in training scenarios.		sorting; ontology-based acquisition
			approaches
3.2.3.2	Students can use standardised	2. application	Clinical Quality Language; Arden
	representation formats for	and analysing	syntax (medical logic modules,
	medical knowledge to build		time operators, fuzzification);
	knowledge bases.		description logics and Web
			Ontology Language (OWL); top-
			level ontologies
3.2.3.3	Students are able to	2. application	Definitions of guidelines vs.
	operationalise evidence-based	and analysing	treatment pathway; use of the
	guidelines and clinical treatment		AWMF portal; AWMF guideline
	pathways on the basis of standard		regulations and the meaning of
	formats in a computer executable		AWMF development stages; use of
	form.		workflow patterns in guideline



			operationalisation and for
			comparing different guideline
			representation formats; Business
			Process Model and Notation
			(BPMN)
3.2.3.4	Students will be able to apply	2. application	Supervised/unsupervised learning;
	established machine learning (ML)	and analysing	multilinear and logistic regression;
	methods to implement decision-		support vector machines;
	support systems and explain the		ensemble methods (especially
	respective strengths and		random forests); multilayer
	weaknesses of ML methods and		perceptrons and overview of more
	classical knowledge acquisition in		complex network topologies;
	a medical context.		cross-over validation
3.2.3.5	Students can name the socio-	3. evaluating	Known success factors for the
	technical effects of the	and	introduction and routine use of
	introduction of clinical decision	synthesising	clinical decision support systems
	support systems in routine		Clinical decision support systems;
	practice, explain methods for the		overalerting; alert fatigue; usability
	measurement of these effects and		aspects and usability
	relevant results, and take these		measurement; primary studies
	effects into account during		(e.g. intervention studies),
	implementation.		systematic reviews and meta-
			analyses on clinical outcomes of
			system implementation;
			challenges of multiprofessional
			communication



Chapter 4 Personal competences

Topic 4.1 Self-competence

Subtopic 4.1.1 Self-competence

No.	Expertise	Level	Content & curricular notes
4.1.1.1	Students can structure a project in terms of time, set and adhere to sensible short and long-term deadlines and deal with delays.	2. application and analysing	Accompany and support time management, e.g. for student projects or theses.
4.1.1.2	Students can motivate themselves to learn and develop personally, persevere with a subject, deal with failure and ensure a healthy learning and working environment.	2. application and analysing	Provide regular feedback, invite reflection on learning progress
4.1.1.3	Students can recognise and critically deal with role and gender stereotypes and know the importance of gender-sensitive language.	2. application and analysing	Have students work on case studies, recognise stereotypes, discuss studies on gender- equitable language in order to discuss the importance of breaking through predefined stereotypes (e.g. "scientists are always male")
4.1.1.4	Students know their own abilities, characteristics and attitudes and can critically reflect on their own behaviour in social situations.	3. evaluating and synthesising	Enable mutual peer feedback, enable learning diaries, allow group work to be reflected on

Topic 4.2 Methodological competence

Subtopic 4.2.1 Methodological competence

No.	Expertise	Level	Content & curricular notes
4.2.1.1	Students understand that scientific texts symbolise interaction in the knowledge community and know the basic structure of a scientific text.	1. knowing and understanding	Have simple scientific texts and presentations written and give feedback
4.2.1.2	Students can use presentation software appropriately, can structure and give a presentation to suit the target group and can give a free presentation.	2. application and analysing	Have different types of presentations given and provide feedback.
4.2.1.3	Students can understand English specialised texts and presentations, can write an English specialised text and give an English presentation.	2. application and analysing	Have English texts read and presented



4.2.1.4	Students can use theoretical facts	2. application	Have practical examples and case
	to solve practical problems and	and analysing	studies discussed, discuss
	can reflect on a practical situation		experience reports from graduates
	against the background of		
	theories.		
4.2.1.5	Students can research specialised	2. application	Have a literature review written
	literature in a targeted manner,	and analysing	
	are familiar with relevant		
	specialist databases and can use		
	them, can develop search		
	strategies, can critically evaluate		
	specialised literature in terms of		
	reliability and relevance and can		
	use the information they find in a		
	targeted manner.		
4.2.1.6	Students can recognise their own	2. application	Have group work and final theses
	project as a project and	and analysing	planned as projects. Offer
	systematically plan and implement		opportunities for self-reflection on
	it accordingly.		the management of own projects.
4.2.1.7	Students can critically reflect on	3. evaluating	Create reflections on topics or
	their own professional self-image,	and	practical experiences, facilitate
	can reflect on their learning	synthesising	discussions with experts
	experiences and can critically		
	reflect on their own behaviour in a		
	situation.		
4.2.1.8	Students can identify and analyse	3. evaluating	Discuss and reflect on practical
	technical problems, can develop	and	examples and case studies.
	suitable methods and approaches	synthesising	
	to solve the problem and can	_	
	weigh up and select alternative		
	solutions, also with regard to their		
	risks.		

Topic 4.3 Social competence

Subtopic 4.3.1 Social competence

No.	Expertise	Level	Content & curricular notes
4.3.1.1	Students can work together with	2. application	Facilitate group work, enable
	other people in a goal-oriented	and analysing	reflection on team processes, offer
	and appreciative manner to fulfil a		coaching
	task, can define and adhere to		
	team rules, can name the roles in		
	a team and are prepared to take		
	on a role, can recognise problems		
	in a team and address them		
	appropriately, can recognise and		
	use different perspectives in		



 interprofessional teams as a resource, know the key phases of team building and can describe which phase a team is in. 4.3.1.2 Students know the usual rules of dialogue in professional communication, can clearly articulate and defend their own points of view, can convince decision-makers of the need for action, can present alternatives with their strengths and weaknesses and make a convincing proposal for action and can actively listen to an interlocutor and accept other points of view and admit their own mistakes. 4.3.1.3 Students are prepared to take responsibility for leading a group to achieve a goal, can motivate a 	
team building and can describe which phase a team is in.Facilitate group discussions and have these observed and reflect upon; oral examination discussions; role plays.4.3.1.2Students know the usual rules of dialogue in professional communication, can clearly articulate and defend their own points of view, can convince decision-makers of the need for action, can present alternatives with their strengths and weaknesses and make a convincing proposal for action and can actively listen to an interlocutor and accept other points of view and admit their own mistakes.2. application and analysing4.3.1.3Students are prepared to take responsibility for leading a group2. application and analysingAllow small groups to take the lead, enable coaching and	-
which phase a team is in.2. application and analysingFacilitate group discussions and have these observed and reflect upon; oral examination discussions; role plays.4.3.1.2Students know the usual rules of dialogue in professional communication, can clearly articulate and defend their own points of view, can convince decision-makers of the need for action, can present alternatives with their strengths and weaknesses and make a convincing proposal for action and can actively listen to an interlocutor and accept other points of view and admit their own mistakes.2. application and analysingFacilitate group discussions and have these observed and reflect upon; oral examination discussions; role plays.4.3.1.3Students are prepared to take responsibility for leading a group2. application and analysingAllow small groups to take the lead, enable coaching and	-
 4.3.1.2 Students know the usual rules of dialogue in professional communication, can clearly articulate and defend their own points of view, can convince decision-makers of the need for action, can present alternatives with their strengths and weaknesses and make a convincing proposal for action and can actively listen to an interlocutor and accept other points of view and admit their own mistakes. 4.3.1.3 Students are prepared to take responsibility for leading a group 2. application and analysing Facilitate group discussions and have these observed and reflect upon; oral examination discussions; role plays. Facilitate group discussions and have these observed and reflect upon; oral examination discussions; role plays. Facilitate group discussions and have these observed and reflect upon; oral examination discussions; role plays. Facilitate group discussions and have these observed and reflect upon; oral examination discussions; role plays. Facilitate group discussions and have these observed and reflect upon; oral examination discussions; role plays. Facilitate group discussions and have these observed and reflect upon; oral examination discussions; role plays. 	-
 dialogue in professional communication, can clearly articulate and defend their own points of view, can convince decision-makers of the need for action, can present alternatives with their strengths and weaknesses and make a convincing proposal for action and can actively listen to an interlocutor and accept other points of view and admit their own mistakes. 4.3.1.3 Students are prepared to take responsibility for leading a group 	7
 communication, can clearly articulate and defend their own points of view, can convince decision-makers of the need for action, can present alternatives with their strengths and weaknesses and make a convincing proposal for action and can actively listen to an interlocutor and accept other points of view and admit their own mistakes. 4.3.1.3 Students are prepared to take responsibility for leading a group 2. application and analysing 4.3.1.3 Students are prepared to take responsibility for leading a group 	4
 articulate and defend their own points of view, can convince decision-makers of the need for action, can present alternatives with their strengths and weaknesses and make a convincing proposal for action and can actively listen to an interlocutor and accept other points of view and admit their own mistakes. 4.3.1.3 Students are prepared to take responsibility for leading a group 	r
 points of view, can convince decision-makers of the need for action, can present alternatives with their strengths and weaknesses and make a convincing proposal for action and can actively listen to an interlocutor and accept other points of view and admit their own mistakes. 4.3.1.3 Students are prepared to take responsibility for leading a group Allow small groups to take the lead, enable coaching and 	
 decision-makers of the need for action, can present alternatives with their strengths and weaknesses and make a convincing proposal for action and can actively listen to an interlocutor and accept other points of view and admit their own mistakes. 4.3.1.3 Students are prepared to take responsibility for leading a group and analysing 	
 action, can present alternatives with their strengths and weaknesses and make a convincing proposal for action and can actively listen to an interlocutor and accept other points of view and admit their own mistakes. 4.3.1.3 Students are prepared to take responsibility for leading a group 2. application and analysing Allow small groups to take the lead, enable coaching and 	
 with their strengths and weaknesses and make a convincing proposal for action and can actively listen to an interlocutor and accept other points of view and admit their own mistakes. 4.3.1.3 Students are prepared to take responsibility for leading a group and analysing and analysing 	
 weaknesses and make a convincing proposal for action and can actively listen to an interlocutor and accept other points of view and admit their own mistakes. 4.3.1.3 Students are prepared to take responsibility for leading a group 2. application and analysing Allow small groups to take the lead, enable coaching and 	
 convincing proposal for action and can actively listen to an interlocutor and accept other points of view and admit their own mistakes. 4.3.1.3 Students are prepared to take responsibility for leading a group and analysing 	
 can actively listen to an interlocutor and accept other points of view and admit their own mistakes. 4.3.1.3 Students are prepared to take responsibility for leading a group and analysing lead, enable coaching and 	
interlocutor and accept other points of view and admit their own mistakes.Allow small groups to take the lead, enable coaching and4.3.1.3Students are prepared to take responsibility for leading a group2. application and analysingAllow small groups to take the lead, enable coaching and	
points of view and admit their own mistakes.Image: constant of the second seco	
own mistakes.4.3.1.3Students are prepared to take responsibility for leading a group2. application and analysingAllow small groups to take the lead, enable coaching and	
4.3.1.3Students are prepared to take responsibility for leading a group2. application and analysingAllow small groups to take the lead, enable coaching and	
responsibility for leading a group and analysing lead, enable coaching and	
to achieve a goal, can motivate a	
team towards a common goal, can	
coordinate and moderate the joint	
work in a team, know personality	
styles and can take these into	
account when assigning roles in	
the team and know methods for	
avoiding and resolving team	
conflicts.	
4.3.1.4 Students can analyse the causes of 2. application Work on case studies (e.g. video	
conflicts and can propose and and analysing and reflect on them together,	
implement solutions to conflicts.	
plays to practise solution strates	